

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

ALAMEDA COUNTY TREASURER

1221 OAK ST

OAKLAND

CA 94612

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	6,080,578.25
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	5.69385070

<b>Gross Claim</b>	<b>\$6,080,578.25</b>
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<b>Net Claim / Payment Amount</b>	<b>\$6,080,578.25</b>
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<b>YTD Amount:</b>	<b>\$15,422,494.93</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 1 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

ALPINE COUNTY TREASURER  
PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	13,458.68
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.01260270

<b>Gross Claim</b>	<b>\$13,458.68</b>
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<b>Net Claim / Payment Amount</b>	<b>\$13,458.68</b>
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<b>YTD Amount:</b>	<b>\$34,135.97</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 2 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

AMADOR COUNTY TREASURER

810 COURT ST

JACKSON

CA 95642

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	84,410.66
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.07904210

<b>Gross Claim</b>	<b>\$84,410.66</b>
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<b>Net Claim / Payment Amount</b>	<b>\$84,410.66</b>
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<b>YTD Amount:</b>	<b>\$214,095.26</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 3 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**BUTTE COUNTY TREASURER**

25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,236,034.24
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.15742190

<b>Gross Claim</b>	<b>\$1,236,034.24</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,236,034.24</b>
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<b>YTD Amount:</b>	<b>\$3,135,019.57</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 4 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**CALAVERAS COUNTY TREASURER**  
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	103,988.52
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.09737480

<b>Gross Claim</b>	<b>\$103,988.52</b>
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<b>Net Claim / Payment Amount</b>	<b>\$103,988.52</b>
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<b>YTD Amount:</b>	<b>\$263,751.63</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 5 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**COLUSA COUNTY TREASURER**

546 JAY ST

COLUSA

CA 95932

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	110,685.66
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.10364600

<b>Gross Claim</b>	<b>\$110,685.66</b>
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<b>Net Claim / Payment Amount</b>	<b>\$110,685.66</b>
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<b>YTD Amount:</b>	<b>\$280,737.94</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 6 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

CONTRA COSTA COUNTY TREASURER  
625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	2,820,975.32
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	2.64156000

<b>Gross Claim</b>	<b>\$2,820,975.32</b>
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<b>Net Claim / Payment Amount</b>	<b>\$2,820,975.32</b>
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<b>YTD Amount:</b>	<b>\$7,154,990.16</b>
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11/20/2013

Page 7 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**DEL NORTE COUNTY TREASURER**  
981 H ST STE 150

CRESCENT CITY CA 95531

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	120,413.56
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.11275520

<b>Gross Claim</b>	<b>\$120,413.56</b>
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<b>Net Claim / Payment Amount</b>	<b>\$120,413.56</b>
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<b>YTD Amount:</b>	<b>\$305,411.33</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

**Collection Period:** 10/16/2013 **To** 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	320,131.94
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.29977140

<b>Gross Claim</b>	<b>\$320,131.94</b>
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<b>Net Claim / Payment Amount</b>	<b>\$320,131.94</b>
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<b>YTD Amount:</b>	<b>\$811,967.71</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 9 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	3,104,085.13
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	2.90666390

<b>Gross Claim</b>	<b>\$3,104,085.13</b>
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<b>Net Claim / Payment Amount</b>	<b>\$3,104,085.13</b>
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<b>YTD Amount:</b>	<b>\$7,873,056.67</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 10 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**GLENN COUNTY TREASURER**  
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	102,064.77
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.09557340

<b>Gross Claim</b>	<b>\$102,064.77</b>
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<b>Net Claim / Payment Amount</b>	<b>\$102,064.77</b>
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<b>YTD Amount:</b>	<b>\$258,872.31</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 11 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**HUMBOLDT COUNTY TREASURER**  
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	554,475.28
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.51921040

<b>Gross Claim</b>	<b>\$554,475.28</b>
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<b>Net Claim / Payment Amount</b>	<b>\$554,475.28</b>
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<b>YTD Amount:</b>	<b>\$1,406,345.22</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 12 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**IMPERIAL COUNTY TREASURER**

940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	668,656.03
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.62612920

<b>Gross Claim</b>	<b>\$668,656.03</b>
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<b>Net Claim / Payment Amount</b>	<b>\$668,656.03</b>
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<b>YTD Amount:</b>	<b>\$1,695,947.95</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 13 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	64,097.96
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.06002130

<b>Gross Claim</b>	<b>\$64,097.96</b>
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<b>Net Claim / Payment Amount</b>	<b>\$64,097.96</b>
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<b>YTD Amount:</b>	<b>\$162,575.07</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 14 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	2,223,680.17
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	2.08225310

<b>Gross Claim</b>	<b>\$2,223,680.17</b>
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<b>Net Claim / Payment Amount</b>	<b>\$2,223,680.17</b>
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<b>YTD Amount:</b>	<b>\$5,640,038.62</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 15 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	185,056.16
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.17328650

<b>Gross Claim</b>	<b>\$185,056.16</b>
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<b>Net Claim / Payment Amount</b>	<b>\$185,056.16</b>
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<b>YTD Amount:</b>	<b>\$469,367.80</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 16 of 57



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

LAKE COUNTY TREASURER  
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	270,331.83
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.25313860

<b>Gross Claim</b>	<b>\$270,331.83</b>
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<b>Net Claim / Payment Amount</b>	<b>\$270,331.83</b>
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<b>YTD Amount:</b>	<b>\$685,657.03</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 17 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

LASSEN COUNTY TREASURER  
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

**Collection Period:** 10/16/2013 **To** 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	137,033.39
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.12831800

<b>Gross Claim</b>	<b>\$137,033.39</b>
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<b>Net Claim / Payment Amount</b>	<b>\$137,033.39</b>
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<b>YTD Amount:</b>	<b>\$347,565.09</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 18 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	43,149,498.79
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	40.40517100

<b>Gross Claim</b>	<b>\$43,149,498.79</b>
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<b>Net Claim / Payment Amount</b>	<b>\$43,149,498.79</b>
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<b>YTD Amount:</b>	<b>\$109,442,375.21</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 19 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**MADERA COUNTY TREASURER**

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	271,118.24
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.25387500

<b>Gross Claim</b>	<b>\$271,118.24</b>
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<b>Net Claim / Payment Amount</b>	<b>\$271,118.24</b>
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<b>YTD Amount:</b>	<b>\$687,651.66</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 20 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**MARIN COUNTY TREASURER**

PO BOX 4220

CIVIC CENTER

SAN RAFAEL

CA 94913

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	366,254.98
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.34296100

<b>Gross Claim</b>	<b>\$366,254.98</b>
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<b>Net Claim / Payment Amount</b>	<b>\$366,254.98</b>
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<b>YTD Amount:</b>	<b>\$928,952.05</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 21 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

MARIPOSA COUNTY TREASURER  
PO BOX 36

MARIPOSA CA 95338

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	74,045.21
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.06933590

<b>Gross Claim</b>	<b>\$74,045.21</b>
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<b>Net Claim / Payment Amount</b>	<b>\$74,045.21</b>
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<b>YTD Amount:</b>	<b>\$187,804.81</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 22 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**MENDOCINO COUNTY TREASURER**  
501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	654,539.51
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.61291050

<b>Gross Claim</b>	<b>\$654,539.51</b>
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<b>Net Claim / Payment Amount</b>	<b>\$654,539.51</b>
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<b>YTD Amount:</b>	<b>\$1,660,143.47</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 23 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

MERCED COUNTY TREASURER

PO BOX 981311

WEST SACRAMENTO

CA 95798 1311

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	593,639.12
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.55588340

<b>Gross Claim</b>	<b>\$593,639.12</b>
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<b>Net Claim / Payment Amount</b>	<b>\$593,639.12</b>
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<b>YTD Amount:</b>	<b>\$1,505,678.56</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 24 of 57



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**MODOC COUNTY TREASURER**  
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	50,484.86
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.04727400

<b>Gross Claim</b>	<b>\$50,484.86</b>
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<b>Net Claim / Payment Amount</b>	<b>\$50,484.86</b>
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<b>YTD Amount:</b>	<b>\$128,047.44</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 25 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**MONO COUNTY TREASURER**

PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	26,145.04
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.02448220

<b>Gross Claim</b>	<b>\$26,145.04</b>
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<b>Net Claim / Payment Amount</b>	<b>\$26,145.04</b>
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<b>YTD Amount:</b>	<b>\$66,313.05</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 26 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	913,097.95
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.85502450

<b>Gross Claim</b>	<b>\$913,097.95</b>
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<b>Net Claim / Payment Amount</b>	<b>\$913,097.95</b>
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<b>YTD Amount:</b>	<b>\$2,315,939.03</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 27 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**NAPA COUNTY TREASURER**

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	346,803.14
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.32474630

<b>Gross Claim</b>	<b>\$346,803.14</b>
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<b>Net Claim / Payment Amount</b>	<b>\$346,803.14</b>
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<b>YTD Amount:</b>	<b>\$879,615.30</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 28 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

NEVADA COUNTY TREASURER  
PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	330,552.70
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.30952940

**Gross Claim** **\$330,552.70**

**Net Claim / Payment Amount** **\$330,552.70**

**YTD Amount:** **\$838,398.45**

For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 29 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO

CA 95798 1024

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	3,375,362.17
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	3.16068760

<b>Gross Claim</b>	<b>\$3,375,362.17</b>
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<b>Net Claim / Payment Amount</b>	<b>\$3,375,362.17</b>
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<b>YTD Amount:</b>	<b>\$8,561,111.11</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 30 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**PLACER COUNTY TREASURER**

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	402,785.44
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.37716810

<b>Gross Claim</b>	<b>\$402,785.44</b>
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<b>Net Claim / Payment Amount</b>	<b>\$402,785.44</b>
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<b>YTD Amount:</b>	<b>\$1,021,606.19</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 31 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY

CA 95971

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	96,533.69
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.09039410

<b>Gross Claim</b>	<b>\$96,533.69</b>
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<b>Net Claim / Payment Amount</b>	<b>\$96,533.69</b>
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<b>YTD Amount:</b>	<b>\$244,843.54</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 32 of 57



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**RIVERSIDE COUNTY TREASURER**

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	2,881,820.50
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	2.69853540

<b>Gross Claim</b>	<b>\$2,881,820.50</b>
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<b>Net Claim / Payment Amount</b>	<b>\$2,881,820.50</b>
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<b>YTD Amount:</b>	<b>\$7,309,315.04</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 33 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SACRAMENTO COUNTY TREASURER**

PO BOX 980264

WEST SACRAMENTO

CA 95798 0264

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	5,418,844.48
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	5.07420350

<b>Gross Claim</b>	<b>\$5,418,844.48</b>
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<b>Net Claim / Payment Amount</b>	<b>\$5,418,844.48</b>
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<b>YTD Amount:</b>	<b>\$13,744,104.27</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 34 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SAN BENITO COUNTY TREASURER**

COURTHOUSE

440 FIFTH ST RM 107

HOLLISTER

CA 95023

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	90,151.90
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.08441820

<b>Gross Claim</b>	<b>\$90,151.90</b>
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<b>Net Claim / Payment Amount</b>	<b>\$90,151.90</b>
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<b>YTD Amount:</b>	<b>\$228,657.07</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 35 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SAN BERNARDINO CO TREASURER**

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	3,722,654.95
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	3.48589240

<b>Gross Claim</b>	<b>\$3,722,654.95</b>
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<b>Net Claim / Payment Amount</b>	<b>\$3,722,654.95</b>
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<b>YTD Amount:</b>	<b>\$9,441,968.31</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 36 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SAN DIEGO COUNTY TREASURER**

PO BOX 980304

WEST SACRAMENTO

CA 95798 0304

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	5,146,326.30
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	4.81901760

<b>Gross Claim</b>	<b>\$5,146,326.30</b>
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<b>Net Claim / Payment Amount</b>	<b>\$5,146,326.30</b>
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<b>YTD Amount:</b>	<b>\$13,052,901.88</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 37 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SAN FRANCISCO COUNTY TREASURER**

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	2,669,858.73
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	2.50005450

<b>Gross Claim</b>	<b>\$2,669,858.73</b>
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<b>Net Claim / Payment Amount</b>	<b>\$2,669,858.73</b>
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<b>YTD Amount:</b>	<b>\$6,771,705.10</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 38 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SAN JOAQUIN COUNTY TREASURER**

PO BOX 981355

WEST SACRAMENTO

CA 95798 1355

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,732,668.83
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.62247030

<b>Gross Claim</b>	<b>\$1,732,668.83</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,732,668.83</b>
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<b>YTD Amount:</b>	<b>\$4,394,660.37</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 39 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

SAN LUIS OBISPO COUNTY TREASURER  
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	767,246.96
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.71844970

<b>Gross Claim</b>	<b>\$767,246.96</b>
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<b>Net Claim / Payment Amount</b>	<b>\$767,246.96</b>
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<b>YTD Amount:</b>	<b>\$1,946,009.38</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 40 of 57



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SAN MATEO COUNTY TREASURER**

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

Sacramento

CA 95812

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	833,092.67
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.78010760

<b>Gross Claim</b>	<b>\$833,092.67</b>
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<b>Net Claim / Payment Amount</b>	<b>\$833,092.67</b>
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<b>YTD Amount:</b>	<b>\$2,113,017.38</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 41 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SANTA BARBARA COUNTY TREASURER**

PO BOX 579

SANTA BARBARA

CA 93102

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,069,502.76
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.00148190

<b>Gross Claim</b>	<b>\$1,069,502.76</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,069,502.76</b>
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<b>YTD Amount:</b>	<b>\$2,712,636.90</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 42 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SANTA CLARA CO TREASURER**

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	3,756,821.24
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	3.51788570

<b>Gross Claim</b>	<b>\$3,756,821.24</b>
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<b>Net Claim / Payment Amount</b>	<b>\$3,756,821.24</b>
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<b>YTD Amount:</b>	<b>\$9,528,626.09</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 43 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SANTA CRUZ COUNTY TREASURER**

PO BOX 1817

SANTA CRUZ

CA 95061

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,115,096.66
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.04417600

<b>Gross Claim</b>	<b>\$1,115,096.66</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,115,096.66</b>
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<b>YTD Amount:</b>	<b>\$2,828,279.13</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 44 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SHASTA COUNTY TREASURER**

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	521,352.13
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.48819390

<b>Gross Claim</b>	<b>\$521,352.13</b>
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<b>Net Claim / Payment Amount</b>	<b>\$521,352.13</b>
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<b>YTD Amount:</b>	<b>\$1,322,333.22</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 45 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	14,384.14
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.01346930

<b>Gross Claim</b>	<b>\$14,384.14</b>
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<b>Net Claim / Payment Amount</b>	<b>\$14,384.14</b>
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<b>YTD Amount:</b>	<b>\$36,483.26</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 46 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**SISKIYOU COUNTY TREASURER**  
311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	168,400.34
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.15769000

<b>Gross Claim</b>	<b>\$168,400.34</b>
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<b>Net Claim / Payment Amount</b>	<b>\$168,400.34</b>
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<b>YTD Amount:</b>	<b>\$427,122.76</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 47 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SOLANO COUNTY T TC**  
675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,105,750.11
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.03542390

<b>Gross Claim</b>	<b>\$1,105,750.11</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,105,750.11</b>
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<b>YTD Amount:</b>	<b>\$2,804,572.98</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 48 of 57



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SONOMA COUNTY TREASURER**

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	855,147.04
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.80075930

<b>Gross Claim</b>	<b>\$855,147.04</b>
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<b>Net Claim / Payment Amount</b>	<b>\$855,147.04</b>
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<b>YTD Amount:</b>	<b>\$2,168,955.05</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 49 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	1,176,028.77
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.10123280

<b>Gross Claim</b>	<b>\$1,176,028.77</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,176,028.77</b>
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<b>YTD Amount:</b>	<b>\$2,982,824.49</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 50 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**SUTTER COUNTY TREASURER**

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	722,094.86
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.67616930

<b>Gross Claim</b>	<b>\$722,094.86</b>
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<b>Net Claim / Payment Amount</b>	<b>\$722,094.86</b>
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<b>YTD Amount:</b>	<b>\$1,831,487.71</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 51 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

**Collection Period:** 10/16/2013 **To** 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	170,763.11
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.15990250

<b>Gross Claim</b>	<b>\$170,763.11</b>
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<b>Net Claim / Payment Amount</b>	<b>\$170,763.11</b>
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<b>YTD Amount:</b>	<b>\$433,115.59</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 52 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

Collection Period: 10/16/2013 To 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	70,910.65
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.06640070

<b>Gross Claim</b>	<b>\$70,910.65</b>
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<b>Net Claim / Payment Amount</b>	<b>\$70,910.65</b>
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<b>YTD Amount:</b>	<b>\$179,854.47</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 53 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

**TULARE COUNTY TREASURER**  
COUNTY CIVIC CENTER RM 103E  
221 SOUTH MOONEY BL  
VISALIA CA 93291

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,879,620.52
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.76007580

<b>Gross Claim</b>	<b>\$1,879,620.52</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,879,620.52</b>
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<b>YTD Amount:</b>	<b>\$4,767,381.78</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 54 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A  
PAYMENT ISSUE DATE: 11/26/2013

TUOLUMNE COUNTY TREASURER  
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

**Collection Period:** 10/16/2013 **To** 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	103,778.35
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.09717800

**Gross Claim** **\$103,778.35**

**Net Claim / Payment Amount** **\$103,778.35**

**YTD Amount:** **\$263,218.56**

For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 55 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

**VENTURA COUNTY TREASURER**

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

**Behavioral Health Subaccount per GC 30027.6(f)**

**Fiscal Year: 2013**

**Collection Period:** 10/16/2013 **To** 11/15/2013

**Payment Calculations:**

Behavioral Health Subaccount apportionment amount per county for current period	1,622,372.43
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	1.51918880

<b>Gross Claim</b>	<b>\$1,622,372.43</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,622,372.43</b>
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<b>YTD Amount:</b>	<b>\$4,114,909.72</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 56 of 57



CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300133A

PAYMENT ISSUE DATE: 11/26/2013

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND

CA 95695

Financial Activity

**Additional Description:**

Behavioral Health Subaccount per Government Code Section 30027.6(f)

Per schedule from the Department of Finance.

To be deposited in the County Local Revenue Fund 2011, Behavioral Health Subaccount

Behavioral Health Subaccount per GC 30027.6(f)

Fiscal Year: 2013

**Collection Period:** 10/16/2013 **To** 11/15/2013

Payment Calculations:

Behavioral Health Subaccount apportionment amount per county for current period	326,314.45
Behavioral Health Subaccount gross monthly apportionment	106,792,021.27
Behavioral Health Subaccount county percentages	0.30556070

<b>Gross Claim</b>	<b>\$326,314.45</b>
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<b>Net Claim / Payment Amount</b>	<b>\$326,314.45</b>
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<b>YTD Amount:</b>	<b>\$827,648.74</b>
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For assistance, please call: Erika Bosnich at (916) 323-2892

11/20/2013

Page 57 of 57